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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on	Gustavo		
	your government-issued picture identification (for	First name	First name	
	example, your driver's	Adolfo		
	license or passport).	Middle name	Middle name	
	Bring your picture	Fuentes		
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	_
2.	All other names you have used in the last 8 years	·		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0123		

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Case number (if known)

Debtor 1 Gustavo Adolfo Fuentes

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs If Debtor 2 lives at a different address: Where you live 331 Calumet Blvd. Harvey, IL 60426 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Document Page 3 of 46 Debtor 1 **Gustavo Adolfo Fuentes**

bankruptcy petition.

Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ☐ No. bankruptcy within the last 8 years? Yes. District **ILNDBKE** When 1/19/15 Case number 15-01702 District When Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you District When Case number, if known Debtor Relationship to you When Case number, if known District Do you rent your Go to line 12. No. residence? ☐ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

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Debtor 1 Gustavo Adolfo Fuentes

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Case number (if known)

art	Report About Any Bu	sinesses	You Own	as a Sole Proprietor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of business	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State & ZIP Code	
	it to this petition.		Check	the appropriate box to describe your business:	
				Health Care Business (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as defined in 11 U.S.C. § 101(53A))	
				Commodity Broker (as defined in 11 U.S.C. § 101(6))	
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadlines operation	s. If you in	der Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate dicate that you are a small business debtor, you must attach your most recent balance sheet, statement or bus statement, and federal income tax return or if any of these documents do not exist, follow the procedure 1)(B).	f
	For a definition of small	■ No.	I am n	ot filing under Chapter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am fi	ling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code	€.
art	4: Report if You Own or	Have Any	/ Hazardo	us Property or Any Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	he hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			the property?	
	O 2			Number, Street, City, State & Zip Code	

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Debtor 1 Gustavo Adolfo Fuentes

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case 16-17383 Desc Main Document Page 6 of 46 Case number (if known) Debtor 1 **Gustavo Adolfo Fuentes** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition.

> I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Gustavo Adolfo Fuentes Signature of Debtor 2 **Gustavo Adolfo Fuentes** Signature of Debtor 1 Executed on Executed on May 24, 2016 MM / DD / YYYY MM / DD / YYYY Case 16-17383 Doc 1 Filed 05/24/16 Entered 05/24/16 12:47:33 Desc Main Document Page 7 of 46

Debtor 1 Gustavo Adolfo Fuentes

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Case number (if known)

/s/ Brian P	. Deshur	Date	May 24, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Brian P. D	eshur		
Printed name			
Law Office	es of David Freydin		
Firm name			
8707 Skok	tie Blvd		
Suite 305			
Skokie, IL	60077		
Number, Street,	City, State & ZIP Code		
Contact phone	(630) 516-9990	Email address	david.freydin@freydinlaw.com
6289354			
Bar number & S	tate		

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		Docume	ent Page 8 of 4	<u> 46 </u>	
Fill in this inform	nation to identify your	case:			
Debtor 1	Gustavo Adolfo F	uentes			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					☐ Check if this is an amended filing
					amended ming

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	2,500.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	3,075.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	5,575.00
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	1,500.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	17,983.00
	Your total liabilities	\$	19,483.00
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,083.33
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,372.00
Pai	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
	■ Yes		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Gustavo Adolfo Fuentes

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,749.67 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	(Case 16-17383	Doc 1		05/24/16 ument	Entered 05/24/16	6 12:47	:33 De	sc M	1ain
Fill	in this inf	ormation to identify y	our case and th	nis filing	:					
Deb	otor 1	Gustavo Ado	Ifo Fuentes							
		First Name	Middle	e Name		Last Name				
	otor 2	First Name	N 4: al al la	Nama		Loot Name				
(Spo	use, if filing)	First Name	Middle	e Name		Last Name				
Unit	ted States	Bankruptcy Court for t	he: NORTHER	N DISTI	RICT OF ILLIN	IOIS				
Cas	se number					-				Check if this is an amended filing
SC n ea hink nfor	chedi	. Be as complete and ac nore space is needed, at	scribe items. List	le. If two	married people	n asset fits in more than one o are filing together, both are e top of any additional pages,	qually resp	onsible for su	pplyin	g correct
	No. Go to	, .	itable interest in a	any resido	ence, building,	land, or similar property?				
1.1				What	is the property	? Check all that apply				
	331 Ca	umet Blvd		_	Single-family h	ome	Do not ded	uct secured cla	ims or	exemptions. Put
	Street addr	ess, if available, or other descr	ription		Duplex or multi	-	the amoun	t of any secure	d claim	s on Schedule D: ured by Property.
					Manufactured of	or mobile home				
	Harvey	IL	60426-0000		Land		Current va			ent value of the ion you own?
	City	State	ZIP Code		Investment pro	pperty		\$5,000.00	port	\$2.500.00
	·			Who	Timeshare Other	in the property? Check one	Describe t	he nature of y		vnership interest y the entireties, or
	Cook				Debtor 2 only					
	County					the debtors and another bu wish to add about this item	(see in:	c if this is com structions)	munit	y property
						ling spouse 27-0000 and adjoining v	acant lo	PIN 29-08	205-0	028-0000

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$2,500.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Case number (if known) Document Debtor 1 **Gustavo Adolfo Fuentes** 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put 130 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Infiniti Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2000 Year: Debtor 2 only Current value of the Current value of the 155000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$1,175.00 \$1,175.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$1.175.00 pages you have attached for Part 2. Write that number here...... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Furniture \$650.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment

Official Form 106A/B Schedule A/B: Property page 2

☐ Yes. Describe.....

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Case number (if known) Document Debtor 1 **Gustavo Adolfo Fuentes** 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$150.00 Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$800.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... \$600.00 Bank of America Checking 17.1. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No

Schedule A/B: Property

Issuer name:

Official Form 106A/B

☐ Yes. Give specific information about them

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Case number (if known) Document Debtor 1 **Gustavo Adolfo Fuentes** 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Yes. List each account separately. Type of account: Institution name: \$500.00 401k through employer 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

Beneficiary:

Schedule A/B: Property

Official Form 106A/B

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

page 4

Surrender or refund

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Case number (if known) Document Debtor 1 **Gustavo Adolfo Fuentes**

	value:
 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to recommend someone has died. ■ No □ Yes. Give specific information 	ceive property because
 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No □ Yes. Describe each claim 	
34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights t ■ No □ Yes. Describe each claim	o set off claims
35. Any financial assets you did not already list ■ No □ Yes. Give specific information	
36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$1,100.00
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
37. Do you own or have any legal or equitable interest in any business-related property?	
■ No. Go to Part 6.	
☐ Yes. Go to line 38.	
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.	
 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? ■ No. Go to Part 7. □ Yes. Go to line 47. 	
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information 	

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

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Case number (if known) Document Debtor 1 **Gustavo Adolfo Fuentes**

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$2,500.00
56.	Part 2: Total vehicles, line 5	\$1,175.00		
57.	Part 3: Total personal and household items, line 15	\$800.00		
58.	Part 4: Total financial assets, line 36	\$1,100.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$3,075.00	Copy personal property total	\$3,075.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$5,575.00

Official Form 106A/B Schedule A/B: Property page 6 Case 16-17383 Doc 1 Filed 05/24/16 Entered 05/24/16 12:47:33 Desc Main

			JII	
Fill in this inform	mation to identify your	case:		
Debtor 1	Gustavo Adolfo F	uentes		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify t	the Property	You Claim as	Exempt
---------	------------	--------------	--------------	--------

 Which set of exemptions are you claiming? Check one only, even if your spouse is filing w

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of	the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only	one box for each exemption.	
331 Calumet Blvd Harvey, IL 60426 Cook County	\$2,500.00	.	\$2,500.00	735 ILCS 5/12-901
joint with non-filing spouse PIN 29-08-205-027-0000 and adjoining vacant lot PIN 29-08-205-028-0000 Line from <i>Schedule A/B</i> : 1.1			6 of fair market value, up to applicable statutory limit	
Furniture Line from Schedule A/B: 6.1	\$650.00		\$650.00	735 ILCS 5/12-1001(b)
Ellie IIolii Gonedale A.D. G. I			6 of fair market value, up to applicable statutory limit	
Clothing Line from Schedule A/B: 11.1	\$150.00	.	\$150.00	735 ILCS 5/12-1001(a)
Ellie IIolii Genedale A.B.			6 of fair market value, up to applicable statutory limit	
Bank of America Checking Line from Schedule A/B: 17.1	\$600.00	•	\$600.00	735 ILCS 5/12-1001(b)
Z.i.o. i.o.i. Goriodaio / v.B. TTTT			6 of fair market value, up to applicable statutory limit	
401k through employer Line from Schedule A/B: 21.1	\$500.00		\$500.00	735 ILCS 5/12-1006
Line Ironi Scriedule AVD. 21.1			6 of fair market value, up to	

Case 16-17383 Filed 05/24/16 Desc Main Entered 05/24/16 12:47:33 Document Page 17 of 46 Debtor 1 Gustavo Adolfo Fuentes Case number (if known) 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Doc 1

No

Yes

(Case 16-17383	Doc 1 Filed 05/24/16 Document		ed 05/24/16 12:4 8 of 46	7:33 Desc N	<i>l</i> lain
Fill in this inf	ormation to identify you					
Debtor 1	Gustavo Adolfo First Name	Fuentes Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	LINOIS			
Case number (if known)					_	cif this is an ded filing
Official Fo		Who Have Claims	Secure	ed by Property		12/15
	the Additional Page, fill it	If two married people are filing togeth out, number the entries, and attach it				
□ No. Ch	ors have claims secured by eck this box and submit to all in all of the information	his form to the court with your other	·schedules.`	You have nothing else to	report on this form.	
2. List all secur	If more than one creditor has	more than one secured claim, list the cre a particular claim, list the other creditor cal order according to the creditor's nam	s in Part 2. As	Amount of claim Do not deduct the	Column B Value of collateral that supports this	Column C Unsecured portion
2.1 Sam's	Auto	Describe the property that secures	the claim:	value of collateral. \$1,500.00	\$1,175.00	If any \$325.00
Creditor's N	Name	2000 I30 Infiniti 155000 mile	s		· •	
	. Milwaukee o, IL 60641	As of the date you file, the claim is: apply. Contingent	Check all that			
Number, S	treet, City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the	e debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 onl □ Debtor 2 onl	•	☐ An agreement you made (such as car loan)	mortgage or s	ecured		
Debtor 1 and		☐ Statutory lien (such as tax lien, me	chanic's lien)			
_	of the debtors and another s claim relates to a y debt	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)	Automob	ile PMSI		
Date debt was	incurred	Last 4 digits of account num	ber			

\$1,500.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$1,500.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		10 1,000 1	Document	Page 19 of 46	5 5000	, ividii
Fill in t	his information	on to identify your o				
Debtor	1 (Gustavo Adolfo F	uentes			
D obto.		irst Name	Middle Name	Last Name		
Debtor (Spouse		irst Name	Middle Name	Last Name		
United	States Bankru	ptcy Court for the:	NORTHERN DISTRICT OF ILLI	INOIS		
Case n					_	eck if this is an nended filing
	al Form 1 dule E/F:		ho Have Unsecured (Claims		12/15
any exec Schedul Schedul eft. Atta	cutory contracts e G: Executory e D: Creditors \ ch the Continus ed case number	s or unexpired leases Contracts and Unexpi Who Have Claims Secu ation Page to this pag	that could result in a claim. Also lis ired Leases (Official Form 106G). Do ured by Property. If more space is n e. If you have no information to repo	Claims and Part 2 for creditors with NONPRI st executory contracts on Schedule A/B: Prop o not include any creditors with partially secu eeded, copy the Part you need, fill it out, num ort in a Part, do not file that Part. On the top o	perty (Official ured claims tl nber the entri	Form 106A/B) and on hat are listed in ies in the boxes on the
1. Do		ave priority unsecured				
	No. Go to Part 2					
	Yes.					
Part 2:		Your NONPRIORIT	Y Unsecured Claims			
3. Do	anv creditors h	ave nonpriority unsec	ured claims against you?			
_	-		art. Submit this form to the court with y	our other schodules		
	Yes.	offiling to report in this pa	art. Submit this form to the court with y	our other schedules.		
_	Yes.					
uns	ecured claim, lis n one creditor ho	t the creditor separately	for each claim. For each claim listed,	e creditor who holds each claim. If a creditor had identify what type of claim it is. Do not list claims are more than three nonpriority unsecured claims.	s already inclu	ided in Part 1. If more
i ui						Total claim
	Advocate I	Ilinois Masonic P	hys			
4.1	Grou		Last 4 digits of acco	unt number	_	\$100.00
	75 Remitta	y Department nce Dr., Ste 6994	When was the debt i	ncurred?		
	Chicago, IL Number Street	City State Zlp Code	As of the date you fi	le, the claim is: Check all that apply		
	Who incurred	the debt? Check one.				
	Debtor 1 or	nly	☐ Contingent			
	Debtor 2 or	ıly	☐ Unliquidated			
	Debtor 1 an	d Debtor 2 only	☐ Disputed			
	☐ At least one	of the debtors and and	other Type of NONPRIORI	TY unsecured claim:		
	☐ Check if th	is claim is for a comm				
	debt Is the claim su	ubject to offset?	Obligations arising report as priority claim	g out of a separation agreement or divorce that years	ou did not	
	■ No			or profit-sharing plans, and other similar debts		
	Yes		Other. Specify	Medical Bill		

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Document Page 20 of 46 Debtor 1 Gustavo Adolfo Fuentes Case number (if know) \$800.00 4.2 Alexian Brothers Medical Center Last 4 digits of account number Nonpriority Creditor's Name 22589 Network Pl. When was the debt incurred? Chicago, IL 60673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Bill ☐ Yes 4.3 Calvary SPV I, LLC Last 4 digits of account number \$472.00 Nonpriority Creditor's Name 500 Summit Lake Dr., Ste 400 When was the debt incurred? 661 Glenn Avenue Valhalla, NY 10595 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Collection ☐ Yes Other. Specify 4.4 \$472.00 **Capital One** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 85520 Richmond, VA 23285 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

■ Other. Specify Charge

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

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Document Page 21 of 46 Debtor 1 Gustavo Adolfo Fuentes Case number (if know) \$800.00 4.5 City of Chicago Last 4 digits of account number Nonpriority Creditor's Name 121 N. LaSalle St. When was the debt incurred? **Room 107** Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Parking tickets ☐ Yes 4.6 **Consumer Financial Svc** Last 4 digits of account number \$7,942.00 Nonpriority Creditor's Name When was the debt incurred? 10431 US Highway 19 Port Richey, FL 34668 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Deficiency Balance** Other. Specify 4.7 IL Tollway - Violations Admin. \$1,200.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2700 Ogden Avenue **Downers Grove, IL 60515-1703** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Tolls

Debts to pension or profit-sharing plans, and other similar debts

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DCDtO	Gustavo Adollo Fuelites		
4.8	Illinois Masonic Hospital	Last 4 digits of account number	\$100.00
	Nonpriority Creditor's Name Bankruptcy Department 836 W. Wellington Chicago, IL 60657	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bill	
4.9	Loya Insurance	Last 4 digits of account number	\$100.00
	Nonpriority Creditor's Name 4640 Diversey Ave. Chicago, IL 60639	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection	
4.1	DI O		40.000.00
0	PLS Nonpriority Creditor's Name	Last 4 digits of account number	\$2,032.00
	947 E Sibley Blvd	When was the debt incurred?	
	Dolton, IL 60419		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	По	
	_	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other, Specify Payday Loan	

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Document Page 23 of 46 Debtor 1 Gustavo Adolfo Fuentes Case number (if know) 4.1 \$800.00 **Presence Saint Mary's Hospital** Last 4 digits of account number Nonpriority Creditor's Name 2233 W. Division When was the debt incurred? Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bill ☐ Yes 4.1 **Resurrection Health Care** \$2,400.00 Last 4 digits of account number Nonpriority Creditor's Name West Suburban Medical Center When was the debt incurred? 3 Erie Court Oak Park, IL 60302 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Bill ☐ Yes 4.1 **Rodolfo Carreto** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 4842 W. Eddy When was the debt incurred? Chicago, IL 60641 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed

Case 16-17383 Doc 1 Filed 05/24/16 Entered 05/24/16 12:47:33 Desc Main Document Page 24 of 46 Case number (if know) Debtor 1 Gustavo Adolfo Fuentes 4.1 **State Collection Service** \$765.00 Last 4 digits of account number Nonpriority Creditor's Name 2509 S. Stoughton Rd. When was the debt incurred? Madison, WI 53716 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts **Medical Bill** ☐ Yes Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Arnold Scott Harris PC** Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 111 W. Jackson Blvd, Ste 600 ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60604-4134 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Linebarger Goggan Blair and Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Sampson ■ Part 2: Creditors with Nonpriority Unsecured Claims PO Box 06152 Chicago, IL 60606 Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
Total claims	6a.	Domestic support obligations	6a.	\$	0.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	. —	17 092 00
	Oi.	here.		\$	17,983.00

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		I AMAIIIII.	III I (MM. 7.7 M ¥U	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Gustavo Adolfo I	uentes		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Name Number Street Str		Person or	company with	h whom you have the cer, Street, City, State and ZIP Co	contract or lease	State what the contract or lease is for
Number Street	2.1					
Number Street City State ZIP Code 2.2 Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code		Name				_
City State ZIP Code 2.2 Name Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 State ZIP Code		Name				
City State ZIP Code 2.2 Name Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 State ZIP Code						
Number Street State ZIP Code		Number	Street			_
Number Street State ZIP Code						
Number Street State ZIP Code		Citv		State	ZIP Code	_
Name	22					
Number Street 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 State ZIP Code		NI				_
City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 State ZIP Code		Name				
City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 State ZIP Code						
City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 State ZIP Code		Number	Street			_
2.3 Name Number Street State ZIP Code 2.4 Number Street Street		rambor	Olioot			
2.3 Name Number Street State ZIP Code 2.4 Number Street Street		City		Ctata	7ID Code	
Number Street City State ZIP Code 2.4 Number Street City State ZIP Code 2.5		City		State	ZIF Code	
Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 State ZIP Code	2.3					_
City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 State ZIP Code		Name				
City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 State ZIP Code						
City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 State ZIP Code						_
2.4 Name Number Street City State ZIP Code 2.5		Number	Street			
2.4 Name Number Street City State ZIP Code 2.5						
Name Number Street City State ZIP Code 2.5		City		State	ZIP Code	
Name Number Street City State ZIP Code 2.5	2.4					
Number Street City State ZIP Code 2.5		Name				_
City State ZIP Code		Name				
City State ZIP Code						
City State ZIP Code		Number	Street			
2.5						
2.5		City		State	ZIP Code	_
	2.5	Oity		Ciaio	Zii Codo	
Name	2.5					<u> </u>
		Name				
Number Street		Number	Ctroot			_
Number Street		number	Sireet			
						<u> </u>
City State ZIP Code		City		State	ZIP Code	

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		Docume	ent Page 26 d)T 4h	
Fill in this in	formation to identify your				
Debtor 1	Gustavo Adolfo F	uentes			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number	r				
(if known)					☐ Check if this is an amended filing
	- 40011				amenaea ming
	Form 106H	obtovo			
<u>scneau</u>	le H: Your Cod	eptors			12/15
No Yes 2. Within Arizona, No. Go Yes. D 3. In Columnin line 2	California, Idaho, Louisiana, o to line 3. Did your spouse, former spound 1, list all of your codebt again as a codebtor only i	lived in a community pr Nevada, New Mexico, Pu use, or legal equivalent live ors. Do not include your f that person is a guaran	e with you at the time? spouse as a codebtor tor or cosigner. Make	y? (Community property ington, and Wisconsin.) if your spouse is filing sure you have listed the	y states and territories include g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
out Colu	ımn 2.	romi 100E/F), or Sched	ule 9 (Official Form 10		
	lumn 1: Your codebtor ne, Number, Street, City, State and ZI	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
	mber Street			☐ Schedule D, line ☐ Schedule E/F, I ☐ Schedule G, line	ine
City		State	ZIP Code		
3.2 Nar				☐ Schedule D, ling ☐ Schedule E/F, I☐ Schedule G, ling ☐ Schedule G	ine
Nur City	mber Street	State	ZIP Code		

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Fill	in this information to identify your ca	ase:		
Del	otor 1 Gustavo Ad	olfo Fuentes		
1	otor 2			
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS	
Cas	se number			Check if this is:
(If kr	nown)		-	☐ An amended filing
				☐ A supplement showing postpetition chapter 13 income as of the following date:
	fficial Form 106l			MM / DD/ YYYY
S	chedule I: Your Inc	ome		12/15
sup spo atta	plying correct information. If you use. If you use. If you are separated and you	are married and not filing wi	ng jointly, and your spouse is living ith you, do not include information	d Debtor 2), both are equally responsible for g with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every question.
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,		■ Employed	■ Employed
attach a separate page with information about additional		Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Delivery Driver	Hostess
	Include part-time, seasonal, or self-employed work.	Employer's name	Toeerllino Delivery Service	Sophia's House of Pancakes
	Occupation may include student or homemaker, if it applies.	Employer's address	3722 W. Agatite Chicago, IL 60625	7110 W 159th St. Orland Park, IL 60462

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

1 year

2 years

How long employed there?

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 1,300.00 2,383.33 2. 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 2,383.33 1,300.00

Official Form 106I Schedule I: Your Income page 1

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Debt	or 1	Gustavo Adolfo Fuentes		(Case	e number (if known)	_				
					Fo	r Debtor 1		For Del			
	Сор	y line 4 here	4.		\$_	2,383.33		\$		300.00	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	0.00		\$		0.00	
	5b.	Mandatory contributions for retirement plans	5b).	\$	0.00		\$		0.00	_
	5c.	Voluntary contributions for retirement plans	5c	:.	\$	0.00		\$		0.00	_
	5d.	Required repayments of retirement fund loans	5d	l.	\$	0.00		\$		0.00	_
	5e.	Insurance	5e) .	\$_	0.00		\$		0.00	
	5f.	Domestic support obligations	5f.		\$_	0.00		\$		0.00	_
	5g.	Union dues	5g		\$_	0.00		\$		0.00	_
	5h.	Other deductions. Specify:	_ 5h	1.+	\$_	0.00	+	\$		0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	0.00		\$		0.00	_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,383.33		\$	1,	300.00	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$	400.00		\$		0.00	
	8b.	Interest and dividends	8b		\$ -	0.00		\$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c		\$_	0.00		\$		0.00	_
	8d.	Unemployment compensation	8d		\$_	0.00		\$		0.00	_
	8e.	Social Security	8e).	\$_	0.00		\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$_	0.00		\$		0.00	_
	8g.	Pension or retirement income	8g		\$_	0.00		\$		0.00	_
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$_	0.00	+	\$		0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	;	\$	400.00		\$		0.0	0
10	Cale	culate monthly income. Add line 7 + line 9.	10.	\$		2,783.33 + \$		1,300	00	= \$	4,083.33
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		2,763.33		1,300	.00	- Ψ -	4,063.33
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe				,	I in <i>Sche</i>		e J. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certainies						f it	12.	\$	4,083.33
13.	Dov	you expect an increase or decrease within the year after you file this form	?						,	Combi month	ned ly income
. • .		No.									
	$\overline{}$	Yes Explain:									

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			1		
Fill i	n this information to identify your case:				
Debt	tor 1 Gustavo Adolfo Fuentes		Checl	c if this is:	
Debt	tor 2			An amended filing	ving postpetition chapter
	buse, if filing)				the following date:
	NODTHERN DIGITAL OF H	LINOIO	_		
Unite	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF IL	LLINOIS	ľ	MM / DD / YYYY	
	e number nown)				
Of	ficial Form 106J				
Sc	chedule J: Your Expenses				12/1
info	as complete and accurate as possible. If two married peoplermation. If more space is needed, attach another sheet to to the nber (if known). Answer every question.				
Part					
1.	Is this a joint case?				
	No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Exper</i>	nses for Senarate House	shold of Debt	or 2	
		ises for Separate House	noid of Debti	JI 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Yes. Fill out this information feach dependent	•		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Son		18 mos	■ Yes
				_	□ No
		Daughter		4	Yes
					□ No
					☐ Yes ☐ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				- 100
expe	Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unle enses as of a date after the bankruptcy is filed. If this is a slicable date.				
the	ude expenses paid for with non-cash government assistan value of such assistance and have included it on <i>Schedule</i> icial Form 106I.)			Your expo	enses
4.	The rental or home ownership expenses for your resident payments and any rent for the ground or lot.	ce. Include first mortgage	e 4. \$		0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		442.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		75.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		50.00
	4d. Homeowner's association or condominium dues		4d. \$		0.00
5	Additional mortgage payments for your residence, such a	s home equity loans	5 \$		0.00

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Debto	or 1 <u>G</u> u	ustavo Adolfo Fuentes	Case num	ber (if known)	
6.	Utilities:				
-		ectricity, heat, natural gas	6a.	\$	180.00
(6b. Wa	ater, sewer, garbage collection	6b.	\$	50.00
(6c. Te	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	180.00
(her. Specify:	6d.	\$	0.00
7.		d housekeeping supplies		\$	650.00
		re and children's education costs	8.	\$	50.00
		g, laundry, and dry cleaning	9.	\$	100.00
	_	Il care products and services	10.	\$	65.00
		and dental expenses	11.	·	50.00
		rtation. Include gas, maintenance, bus or train fare.		·	
		oclude car payments.	12.	\$	340.00
13. l	Entertair	nment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
14. (Charitab	ole contributions and religious donations	14.	\$	0.00
15. l	Insuranc	ce.			
ı	Do not in	clude insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life	e insurance	15a.		0.00
	15b. He	ealth insurance	15b.	\$	48.00
	15c. Ve	phicle insurance	15c.	\$	42.00
	15d. Otl	her insurance. Specify:	15d.	\$	0.00
6.	Taxes. D	Oo not include taxes deducted from your pay or included in lines 4 or 20.			
;	Specify:		16.	\$	0.00
		ent or lease payments:			
	17a. Ca	ar payments for Vehicle 1	17a.	\$	0.00
	17b. Ca	ar payments for Vehicle 2	17b.	\$	0.00
	17c. Otl	her. Specify:	17c.	\$	0.00
	17d. Otl	her. Specify:	17d.	\$	0.00
		yments of alimony, maintenance, and support that you did not report as		•	0.00
(deducte	d from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	
		ayments you make to support others who do not live with you.		\$	0.00
	Specify:		19.	_	
		al property expenses not included in lines 4 or 5 of this form or on Sche			
		ortgages on other property	20a.	·	0.00
		eal estate taxes	20b.		0.00
		operty, homeowner's, or renter's insurance	20c.		0.00
		aintenance, repair, and upkeep expenses	20d.	·	0.00
		omeowner's association or condominium dues	20e.	\$	0.00
21. (Other: S	pecify:	21.	+\$	0.00
22 (Calculat	e your monthly expenses			
		I lines 4 through 21.		\$	2,372.00
		by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$ ———	2,372.00
				T	
-	22c. Add	l line 22a and 22b. The result is your monthly expenses.		\$	2,372.00
23. (Calculate	e your monthly net income.			
		opy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4.083.33
		ppy your monthly expenses from line 22c above.	23b.	·	2,372.00
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			2,072.00
:	23c. Su	ubtract your monthly expenses from your monthly income.			
		ne result is your <i>monthly net income</i> .	23c.	\$	1,711.33
		,			
		expect an increase or decrease in your expenses within the year after yo			
		ple, do you expect to finish paying for your car loan within the year or do you expect your	mortgage	payment to increase	or decrease because of a
		on to the terms of your mortgage?			
	No.				
	☐ Yes.	Explain here:			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Gustavo Adolfo F				
Debter 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if this is an amended filing
Official For		ın Individual	Debtor's Sc	hadulas	12/15
			20010: 0 00		12,10
	l8 U.S.C. §§ 152, 1341, 1 In Below	519, and 3571.			
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out b	eankruptcy forms?	
■ No					
☐ Yes.	Name of person				etition Preparer's Notice, nature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules file	d with this declaration and	
X /s/ Gu	stavo Adolfo Fuentes	S	X		
Gusta	vo Adolfo Fuentes		Signature of	Debtor 2	
Signatu	ire of Debtor 1				
Date	May 24, 2016		Date		

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Eill is	thic inform	nation to identify you	r 00001			
Debto	or 1	Gustavo Adolfo First Name	Fuentes Middle Name	Last Name		
Debto (Spous	or 2 e if, filing)	First Name	Middle Name	Last Name		
Unite	d States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Case (if know	number _				_	Check if this is an
Stat Be as inforn	complete a	nd accurate as possi	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup y additional pages, write you	
Part '		,	arital Status and Where You	Lived Before		
1. V	Vhat is your	current marital statu	ıs?			
	■ Married □ Not mar	ried				
2. D	ouring the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No ■ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
1	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	2 Explai	n the Sources of You	r Income			
F	ill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?
	☐ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$11,916.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Gustavo Adolfo Fuentes

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last caler nuary 1 to	ndar year: December	31, 2015)	■ Wages, commissions, bonuses, tips	\$24,912.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$26,556.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
	winnings. List each:	If you are fil	ing a joint cas	pensions; rental income; inter e and you have income that y me from each source separa	you received together, list it o	only once under De	ebtor 1.	a gambing and lottery
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
		y 1 of curre filed for bai	nt year until nkruptcy:	Rental Income	\$400.00			
De		t Cantain Da		Made Defens Ven Filed for	Danlementare			
				Made Before You Filed for				
6.	□ No.	Neither D	ebtor 1 nor D	s debts primarily consumer ebtor 2 has primarily consu- personal, family, or househo	u <mark>mer debts.</mark> Consumer debt	s are defined in 11	U.S.C. § 10 ⁻	1(8) as "incurred by an
		During the	90 days befo	re you filed for bankruptcy, di	id you pay any creditor a tota	l of \$6,425* or mo	re?	
		□ No.	Go to line 7					
		□ Yes	paid that cre not include	each creditor to whom you pai editor. Do not include paymer payments to an attorney for t	nts for domestic support obliq his bankruptcy case.	gations, such as ch	ild support a	nd alimony. Also, do
		* Subject	to adjustment	on 4/01/19 and every 3 year	s after that for cases filed on	or after the date o	f adjustment.	
	Yes.			r both have primarily consure you filed for bankruptcy, di		I of \$600 or more?		
		■ No.	Go to line 7					
		☐ Yes	include pay	each creditor to whom you pai ments for domestic support o this bankruptcy case.				
	Creditor	's Name an	d Address	Dates of payme	ent Total amount	Amount you	Was this p	payment for

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7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. No	neral partners; partners partners or more of their votin	erships of which yo g securities; and ar	u are a genera ny managing a	ll partner; corporations gent, including one for	
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a de	ebt that benefited an
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Pai	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. ■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seize Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. 					l, seized, or levied?	
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	d			ргорогту
11.	 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from you accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. 				mounts from your	
	Creditor Name and Address	Describe the action the	e creditor took	Date taken	action was	Amount
12.	 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes 					
Pai	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No	otcy, did you give any gift	s with a total value	of more than \$60	0 per person?	•
	☐ Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the gi	you gave	Value
	Person to Whom You Gave the Gift and Address:					

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14.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or	. ,	, , , , , , , , , , , , , , , , , , , ,	s with a total	value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo	total	Describe what you contributed		Dates you contributed	Value
Pa	rt 6: List Certain Losses					
15.	Within 1 year before you filed for bankroor gambling?	uptcy	or since you filed for bankruptcy, did yo	ou lose anyth	ning because of thef	t, fire, other disaster
	No					
	☐ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Inclu	cribe any insurance coverage for the loude the amount that insurance has paid. Liferance claims on line 33 of Schedule A/B: If	st pending	Date of your loss	Value of property lost
Ра	rt 7: List Certain Payments or Transfer	·s				
16.	Within 1 year before you filed for bankruconsulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No	prepa	ring a bankruptcy petition?			rty to anyone you
	Yes. Fill in the details.		5		D	
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred		Date payment or transfer was made	Amount of payment
	Law Offices of David Freydin 8707 Skokie Blvd Suite 305 Skokie, IL 60077 david.freydin@freydinlaw.com		Attorney Fees		5/23/16	\$400.00
17.	Within 1 year before you filed for bankri promised to help you deal with your cre Do not include any payment or transfer that	ditors	or to make payments to your creditors		r transfer any propei	rty to anyone who
	☐ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bank transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have al	ur bus s made	siness or financial affairs? e as security (such as the granting of a se			
	■ No □ Yes. Fill in the details.					
	Person Who Received Transfer Address		Description and value of property transferred		ny property or received or debts change	Date transfer was made
	Person's relationship to you					

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Debtor 1 **Gustavo Adolfo Fuentes**

19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protection)		y property to a	a self-settle	d trust or similar device	of which you are a	
	■ No □ Yes. Fill in the details.						
	Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer wa	S
Pa	rt 8: List of Certain Financial Accounts, Instru	uments. Safe Denosit	Boxes, and S	torage Unit	S		
	·	•	·	•		rave banafit alaaad	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa	other financial accour	nts; certificate	s of deposi			
	■ No	•					
	Yes. Fill in the details.						
		ast 4 digits of ccount number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last baland before closing o transfe	or
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, a	ıny safe de _l	oosit box or other depos	sitory for securities,	
	■ No						
	Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit or p	ĺ	homo within 1	L voor bofo	ro you filed for bankrun	iov?	
22.	nave you stored property in a storage unit or p	piace officer triair your	nome within	i year beloi	e you med for bankrup	Cy:	
	No						
	Yes. Fill in the details.	Who also has as h		Deceribe	the contents	De veu etill	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
Pa	rt 9: Identify Property You Hold or Control for	r Someone Else					
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ude any prope	rty you bor	rowed from, are storing	for, or hold in trust	
	■ No						
	Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Valu	e
Pa	rt 10: Give Details About Environmental Inforn	nation					
For	the purpose of Part 10, the following definitions	s apply:					
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface	e water, groun				r
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	s defined under any e		law, wheth	er you now own, operat	e, or utilize it or use	d
	Hazardous material means anything an environ		as a hazardous	s waste, ha	zardous substance, tox	ic substance,	

hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Gustavo Adolfo Fuentes

24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of a	ny release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admi	nistrative proceeding under any envi	ironmental law? Include settlements a	nd orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	111: Give Details About Your Business or Co	onnections to Any Business		
27.	Within 4 years before you filed for bankruptcy	y, did you own a business or have ar	ny of the following connections to any	business?
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	, either full-time or part-time	
	☐ A member of a limited liability compa	ny (LLC) or limited liability partnersh	ip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing exec	cutive of a corporation		
	☐ An owner of at least 5% of the voting	or equity securities of a corporation		
	■ No. None of the above applies. Go to Pa	rt 12.		
	☐ Yes. Check all that apply above and fill in	n the details below for each business	S.	
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security r	
		Name of accountant or bookkeeper	Dates business existed	iamber of friit.
28.	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	y, did you give a financial statement	to anyone about your business? Inclu	de all financial
	■ No			
	Yes. Fill in the details below.			
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		

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I have are tru with a	ie and correct. I understand that makin bankruptcy case can result in fines up		eclare under penalty of perjury that the answers taining money or property by fraud in connection s, or both.
18 U.S	S.C. §§ 152, 1341, 1519, and 3571.		
/s/ G	ustavo Adolfo Fuentes		
Gustavo Adolfo Fuentes Signature of Debtor 1		Signature of Debtor 2	
Date	May 24, 2016	Date	
_ ′	. •	ement of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?
■ No			
☐ Yes	3		
Did yo	, , , ,	not an attorney to help you fill out bankruptcy	forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-17383 Doc 1 Filed 05/24/16 Entered 05/24/16 12:47:33 Desc Main Document Page 43 of 46

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In	re Gustavo Adolfo Fuentes		Case No.		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COM	IPENSATION OF ATTOR	NEY FOR DE	CBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. compensation paid to me within one year before the rendered on behalf of the debtor(s) in contempla	e filing of the petition in bankruptcy,	or agreed to be paid	to me, for services re	
	For legal services, I have agreed to accept		\$	4,000.00	
	Prior to the filing of this statement I have rece	eived	\$	400.00	
				3,600.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed	compensation with any other person t	inless they are mem	pers and associates of	f my law firm.
5.	☐ I have agreed to share the above-disclosed composed the agreement, together with a list of the In return for the above-disclosed fee, I have agreed a. Analysis of the debtor's financial situation, and b. Preparation and filing of any petition, schedules c. Representation of the debtor at the meeting of c. Representation of the debtor in adversary procest. [Other provisions as needed] Negotiations with secured creditors reaffirmation agreements and applition 522(f)(2)(A) for avoidance of liens of	the names of the people sharing in the of to render legal service for all aspects rendering advice to the debtor in detes, statement of affairs and plan which creditors and confirmation hearing, and redings and other contested bankruptces to reduce to market value; executions as needed; preparation	compensation is atta s of the bankruptcy c rmining whether to a may be required; d any adjourned hea y matters; mption planning;	ched. ase, including: file a petition in bank rings thereof; preparation and f	cruptcy;
5.	By agreement with the debtor(s), the above-disclos	-	service:		
this	I certify that the foregoing is a complete statement s bankruptcy proceeding.	CERTIFICATION of any agreement or arrangement for	payment to me for re	epresentation of the c	lebtor(s) in
	May 24, 2016	/s/ Brian P. Deshu			
-	Date	Brian P. Deshur 6 Signature of Attorney Law Offices of Da 8707 Skokie Blvd Suite 305 Skokie, IL 60077 (630) 516-9990 Fa david.freydin@fre	, vid Freydin ax: (866) 575-3765	5	_

Name of law firm

United States Bankruptcy Court Northern District of Illinois

In re	Gustavo Adolfo Fuentes		Case No.	
		Debtor(s)	Chapter	13
	VE	RIFICATION OF CREDITOR M	ATRIX	
		Number of Creditors: 17		
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	ors is true and	correct to the best of my
Date:	May 24, 2016	/s/ Gustavo Adolfo Fuentes Gustavo Adolfo Fuentes Signature of Debtor		

Advocate Illinois Masonic Phys Grou Bankruptcy Department 75 Remittance Dr., Ste 6994 Chicago, IL 60675

Alexian Brothers Medical Center 22589 Network Pl. Chicago, IL 60673

Arnold Scott Harris PC 111 W. Jackson Blvd, Ste 600 Chicago, IL 60604-4134

Calvary SPV I, LLC 500 Summit Lake Dr., Ste 400 661 Glenn Avenue Valhalla, NY 10595

Capital One P.O. Box 85520 Richmond, VA 23285

City of Chicago 121 N. LaSalle St. Room 107 Chicago, IL 60604

Consumer Financial Svc 10431 US Highway 19 Port Richey, FL 34668

IL Tollway - Violations Admin. 2700 Ogden Avenue Downers Grove, IL 60515-1703

Illinois Masonic Hospital Bankruptcy Department 836 W. Wellington Chicago, IL 60657

Linebarger Goggan Blair and Sampson PO Box 06152 Chicago, IL 60606

Loya Insurance 4640 Diversey Ave. Chicago, IL 60639

PLS 947 E Sibley Blvd Dolton, IL 60419

Presence Saint Mary's Hospital 2233 W. Division Chicago, IL 60622

Resurrection Health Care West Suburban Medical Center 3 Erie Court Oak Park, IL 60302

Rodolfo Carreto 4842 W. Eddy Chicago, IL 60641

Sam's Auto 3377 N. Milwaukee Chicago, IL 60641

State Collection Service 2509 S. Stoughton Rd. Madison, WI 53716